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This service is for general distribution of information and news of interest to Navy and Marine Corps members, civilian employees, family members and retired members. Distribution is encouraged.

Stories this week:

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Headline: New Vaccine Shortens Pre-Deployment Ritual
Twenty-Nine Palms, CA (MCN)--Marine Expeditionary Forces and Navy Construction Battalions (SeaBees) at Twenty-Nine Palms will be among the first units to benefit from a new vaccine that will do away with the painful posterior shots that have become a dreaded pre-deployment ritual.

The vaccine will also save time in busy pre-deployment schedules.

Expeditionary forces and SeaBees will be the first to receive the vaccine. Other Sailors and Marines will receive it as they deploy to areas where hepatitis is common.

By 2 August, all units within the Seventh Marine Regiment will be inoculated with the Havrix vaccine, which provides lifetime protections against Hepatitis A. The new vaccine will replace the unpopular immunoglobulin shots, which often left large lumps under the skin after the injection.

According to CDR Marshall A. Salkin, MC, Seventh Marines Regimental Surgeon, the hepatitis virus is mainly transmitted through contaminated food or water. Symptoms include jaundice, nausea and vomiting.

"With the vaccine and six-month booster, you will be immune to Hepatitis A for life," said Salkin.

The vaccine is packaged and stored in pre-filled syringes that can be quickly used and disposed of. From a

unit commander's standpoint, the new vaccine will save time and headaches during preparation for deployment, according to HMC Randy D. Miller, a preventive medicine technician assigned to the Seventh Marines Regimental Station.

"When the balloon goes up, time becomes a factor," said Miller, who points out that long lines for pre-deployment vaccinations lead to unhappy and non-productive Marines and Sailors. "People want to spend time with their families, not get shots."

By Cpl. J.J. Connolly, Marine Corps News

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Headline: Podiatrist Takes Health Care to Carrier

(MEDNEWS)--The steel deckplates of a ship can be pretty rough on feet, according to LT Thomas C. Franchini, MSC.

Franchini should know. He's a podiatrist at the Naval Hospital (NH) Newport, RI, who's on his way to USS GEORGE WASHINGTON (CVN-73) to help keep Sailors and Marines on their feet by caring for the bunions, sore ankles, fallen arches and ingrown toenails that can make standing a quarterdeck watch a misery.

Franchini says he's the first podiatrist to be assigned to an aircraft carrier who will actually work as a podiatrist. He and his assistant, HM Christopher Scarpine, will be aboard for two weeks. While he treats plantar's warts and bunions and the myriad of other ailments that add up to aching feet, he'll also take care of more serious conditions that may require minor surgery.

In addition to bringing health care closer to the Sailors and Marines to keep them on the job rather than spending time traveling back and forth to medical treatment facilities, Franchini says there's another benefit to assigning him to the carrier.

"The Navy saves a boat load of money this way," he said. While aboard the carrier, the Navy won't have to pay his living and travel expenses as they usually do when he is assigned on temporary duty to a shore facility.

Franchini said he's looking forward to going on board the carrier for two reasons. "I feel it's a privilege to help care for the Sailors out at sea, and, it's a great experience for me," he said.

By LCDR Lissa Ann Wohltmann, Bureau of Medicine and Surgery

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Headline: DoD(HA) Secretary Calls for Customer Service

Focus

Washington DC--Assistant Secretary of Defense for Health Affairs Dr. Stephen Joseph called customer focus the number one priority for the military health services system.

"Our customers need to have their phone calls answered promptly, they need to be asked if they can be helped and they need to be treated courteously, as important people," Joseph said recently at a TRICARE Conference held in Vienna, VA.

Joseph told the conference attendees that re-engineering business practices will enable TRICARE lead

agent staffs to mold military health care into "the best system in the world.

"It is your opportunity to identify the functional obstacles that restrain you from being a fully customer-focused operation ... (and) implement changes that will enhance operations."

The Navy has taken a step in this direction with their recent implementation of a new customer relations program that will teach "people skills" including everything from how to answer the phone to the basics of managed care.

Although most staff people who come in contact with customers will receive training, special emphasis will be placed on the "front line" people, including clinic front desk personnel, appointment schedules, outpatient records staff, emergency room front desk staff, patient contact representatives, admissions clerks, and health benefits advisors.

(See MEDNEW (NSMN) 96-29 of 25 July for details.)

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Headline: "OR FLEX" Eases Surgery Backlog

USNH Okinawa--What do you do when you're facing a backlog of 150 surgeries?

If you're U.S. Naval Hospital (USNH) Okinawa's director of surgical services, you charter a special Process Action Team (PAT) to help find a way to get the job done.

Three months later, the backlog for elective tubal ligations, or tying of a woman's Fallopian tubes, is zero.

Dubbed "OR FLEX," the undertaking included analyzing the operating rooms' (OR) databases to identify periods of decreased use. That "down time" was then given to CAPT Robert A. Braun, MC, staff gynecologist, and his "tubal team" so that they could use the operating rooms.

"This time in the OR would have been otherwise wasted," said CDR David J. Beardsley, MC, USNH Okinawa's director for surgical services. Beardsley praised Braun and his team for their flexibility, which helped make OR FLEX so successful. Patients were often booked on short notice to take advantage of gaps in the operating room schedule, which meant Braun and his team often had to be available at short notice or at odd times.

"This effort could only have been achieved by cooperation and more importantly--teamwork," Beardsley said. By HMCN(SW) Michael C. Carr, USNH Okinawa

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Headline: Portsmouth Clinic Helps Corpsmen Advance

NMC Portsmouth--Thanks to a group of Chief Petty Officers, corpsmen at Naval Medical Clinic Portsmouth, NH, may be making rate much faster these days.

The chiefs set up a five week long lunch time study program for the 70 corpsmen at the clinic, helping them brush up on chemical, biological, and nuclear medicine; clinical laboratory procedures; emergency medicine; health and dental record keeping; and other topics. The final preparation was to pit teams against each other in a game

format similar to the popular television program,
"Jeopardy."

The result was a nearly eleven percent improvement in test scores in March 1996 from September 1995's scores.

"The program helped me immensely and motivated me to study on my own," said HM2 Joshua R. Ives. "It's an awesome program I strongly recommend to anyone who's is serious about advancing."

Ives scored a 79 out of a possible 80 and was advanced to HM2.

By LCDR Thomas A. Klitzka, MSC, NMC Portsmouth, NH

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Headline: Reservists Help People Stay Healthy

Washington, DC (MEDNEWS)--Keeping people fit and healthy was the theme of a Naval Reserve-sponsored health fair held in Washington, DC, recently for military people and their families.

The Bureau of Medicine and Surgery's Naval Reserve Unit 106 sponsored the event as part of the Navy's wellness program designed to keep Sailors and Marines healthy and on the job rather than in clinics and hospitals.

The fair took place on the drill deck of Naval Reserve Center Anacostia in Washington, DC, and drew nearly 150 military people and their families.

Key to the fair was the various health promotion activities. Fair attendees could have their blood pressure checked, their feet examined by a podiatrist, and their teeth examined by a dentist as well as learn about stress management.

"This ended up being a real multi-service event," said CAPT Sue Miller, NC, USNR, who helped run the health fair. "We had Army, Navy, Naval Reservists, a few Air Force, and family members."

This is the second year the BUMED's Reserve unit has sponsored the event.

By Jan Davis, Bureau of Medicine and Surgery Public Affairs

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Headline: Medical Team Heads to Operation Joint Endeavor

London (NENS)--An eight-member Navy preventive medicine team is heading to Taszar, Hungary, this week to support Operation Joint Endeavor.

The team, due to arrive the end of July, will replace an Army preventive medicine detachment.

The team's major responsibility will be to keep military people and members of the community free of communicable and environmental diseases. They will conduct routine sanitation inspections of camps, test water for purity, ensure waste is disposed of properly, control pest infestations, and monitor personal hygiene.

They will also check for industrial hazards, such as asbestos in buildings and hazardous materials handling and disposal.

The team, made up of Sailors from Navy commands in Europe and the U.S., will remain in Hungary for at least six

months.

By U.S. Naval Forces Europe Public Affairs

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Headline: Happy Birthday, Medical Service Corps!

BUMED Washington DC (MEDNEWS)--The Medical Service Corps will celebrate its birthday on 4 August, marking 49 years of care to the Navy and Marine Corps "family."

The Medical Service Corps was established by the Army-Navy Medical Services Corps Act of 1947 to complement the Navy Medical and Dental Corps to assist with health care administration and health care sciences specialties.

Today, there are nearly 3,500 active duty and Reserve Medical Service Corps members in 32 different specialties serving world-wide on ships, at medical and dental clinics, and hospitals world-wide.

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Headline: Healthwatch: Hypertension Can Be A Silent Killer

(MEDNEWS)--You can have it without even knowing it, without so much as a single symptom. Yet, it can kill you. It's hypertension, commonly known as high blood pressure. While it mainly strikes men, it can also affect women, especially older African American and Hispanic women. It is truly a disease that crosses all boundaries.

According to LCDR Rene Hernandez, MSC, a research physiologist, "Approximately 60 million Americans are hypertensive, that's 1 in 5, and many of them don't know it."

High blood pressure is usually indicated by several consecutive readings greater than 140/90.

"In the Navy, your blood pressure is checked at least once a year when you go to the dentist," said Hernandez. It's also easy to monitor your blood pressure by using a blood pressure cuff found at most supermarkets or gyms.

Hypertension or high blood pressure can be a cause of strokes, congestive heart failure, coronary heart disease, and kidney failure. Some of the conditions that may lead to hypertension include a family history of hypertension, excessive salt intake, excessive alcohol consumption, and a sedentary lifestyle.

Although you may have none of the factors that contribute to high blood pressure, you may still be hypertensive. That is why it is so important to see your doctor regularly.

"The good news is that hypertension can be controlled through simple changes in your lifestyle, weight loss, smoking cessation, exercise, stress management, a healthy diet, and if necessary medication," said Hernandez. Taking steps to avoid becoming overweight, such as increasing physical activity and reducing calories, could help reduce the chance of becoming hypertensive. The National Institutes of Health recommends moderate-intensity, low-resistance, dynamic exercise, such as walking, cycling, or dancing.

Good eating habits like controlling your salt intake to

no more than 1/2 teaspoon of salt a day for the average person helps manage hypertension. So does eating fruits and vegetables, and lowering your fat intake. Caffeine and alcohol have been shown to raise blood pressure. Drink alcohol in moderation, no more than two drinks a day.

By Ann Kirby, Bureau of Medicine and Surgery

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Feedback and suggestions for next week's MEDNEWS is encouraged.